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APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
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NOTICE OF ALLOWANCE MAILED			CLAIMS ALLOWED					
NOTICE OF ALLOWANCE WASTED		Assistant Examiner	Total Claims		Print Claim for O.G			
		ASSISTANT EXCLUSION	DRAWING					
ISSUE FEE		· '	Sheets Drwg. Figs.			Print Fig.		
Amount Due	Date Paid			1		_		
		Primary Examiner						
TERMINAL DISCLAIMER		PREPARED FOR ISSUE	Application Examiner					
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